## RAL EMERGENCY MANAGEMENT AGEN NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077 Expires July 31, 2002

## **ELEVATION CERTIFICATE**

Important: Read the instructions on pages 1 - 7. SECTION A - PROPERTY OWNER INFORMATION For Insurance Company Use: BUILDING OWNER'S NAME Policy Number Averbeck BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. Company NAIC Number W. Birch ZIP CODE Flagstaff PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) 500 Parcel # 100-11-005 BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) Non-residentia SOURCE: GPS (Type): LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: ##° - ##' - ##.##" or ##.#### I NAD 1927 \_\_| NAD 1983 USGS Quad Map SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B3. STATE **B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER B2. COUNTY NAME** AZ 040020 FLAGSTAFF COCONINE B4. MAP AND PANEL B9. BASE FLOOD ELEVATION(S) **B5. SUFFIX B6. FIRM INDEX B7. FIRM PANEL** B8, FLOOD EFFECTIVE/REVISED DATE ZONE(S) (Zone AO, use depth of flooding) NUMBER DATE 6904,4 1940020 - 0007 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. |x| Community Determined |\_\_| Other (Describe): I | FIS Profile I I FIRM B11. Indicate the elevation datum used for the BFE in B9: 🔀 NGVD 1929 💹 NAVD 1988 💹 Other (Describe): B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? |\_\_| Yes Designation Date: SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) C1. Building elevations are based on: |\_\_|Construction Drawings\* Building Under Construction\* | X | Finished Construction \*A new Elevation Certificate will be required when construction of the building is complete. C2. Building Diagram Number \_\_\_\_ (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.) C3. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO Complete Items C3.a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion. Datum NGNO 1929 Conversion/Comments Pipe at the Intersection of Aspen a Sit greaves Elevation reference mark used <u>Ct ty Point # /8/8 406</u> Does the elevation reference mark used appear on the FIRM? X No 6905.7 ft.(m) ☐ a) Top of bottom floor (including basement or enclosure) ☐ b) Top of next higher floor ☐ c) Bottom of lowest horizontal structural member (V zones only) ft.(m) ft.(m) d) Attached garage (top of slab) and e) Lowest elevation of machinery and/or equipment 8 ft.(m) Number, 19 servicing the building (Describe in a Comments area.) ☐ f) Lowest adjacent (finished) grade (LAG) 903 a) Highest adjacent (finished) grade (HAG) ☐ h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 🥒 ☐ i) Total area of all permanent openings (flood vents) in C3.h \_ Ø \_\_\_ sq. in. (sq. cm) SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information in Sections A, B, and C on this certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001. CERTIFIER'S NAME LICENSE NUMBER TITLE Surveyin ADDRESS SIGNATURE TELEPHONE 928 -214- 0214

			or Insurance Company Use:
IMPORTANT: In these spaces, copy the conseponding information from Section A.  BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.			olicy Number
324 W. Birch Unit B	offit, Suite, and/or blug. No.) OK F.O. NOOTE AND BOX		
CITY Flagstaff	STATE AZ	ZIP CODE C	ompany NAIC Number
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)			
Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.			
COMMENTS Bench mark used is City of Flagstaff Point # 1818406, pipe at the			
intersection of Aspen Ave. & Sitgreaves St., elevation = 6909 16			
		1	Check here if attachments
SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)			
For Zone AO and Zone A (without BFE), con	mplete Items E1. through E4. If the Elevation Certi	ficate is intended	for use as supporting
information for a LOMA or LOMR-F, Section C must be completed.			
E1. Building Diagram Number (Select the building diagram most similar to the building for which this certificate is being completed –			
see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)			
E2. The top of the bottom floor (including basement or enclosure) of the building is      ft.(m)      in.(cm)    above or    below (check one) the highest adjacent grade. (Use natural grade, if available.)			
E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is			
ft.(m) lin.(cm) above the highest adjacent grade. Complete Items C3.h and C3.i on front of form.			
E4. For Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's			
floodplain management ordinance?   Yes   No   Unknown. The local official must certify this information in Section G.			
	PPERTY OWNER (OR OWNER'S REPRESENTAT		
The state of the s	epresentative who completes Sections A, B, C (Ite ed BFE) or Zone AO must sign here. <i>The stateme</i>		
the best of my knowledge.	ed bi E) di Zono No mast significio. The stateme	www.	, b, o, and b don out to
PROPERTY OWNER'S OR OWNER'S AUTHOR	IZED REPRESENTATIVE'S NAME	· · · · · · · · · · · · · · · · · · ·	
ADDRESS	CITY	STATE	ZIP CODE
SIGNATURE	DATE	TELEPHONE	
COMMENTS			
			Check here if attachments
SECTION G - COMMUNITY INFORMATION (OPTIONAL)			
The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete			
Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below.  G1.    The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor,			
engineer, or architect who is authorized by state or local law to certify elevation information. (Indicate the source and date of the			
elevation data in the Comments area below.)			
G2.    A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or			
Zone AOG3. <u>  ₭</u> The following information (Items G4-G9) is provided for community floodplain management purposes.			
G4. PERMIT NUMBER G5. DATE	TE PERMIT ISSUED   G6. DATE CEI	RTIFICATE OF CO	MPLIANCE/OCCUPANCY
	New Construction     Substantial Improvement		1
G8. Elevation of as-built lowest floor (includin		(1905 . 7 ft	.(m)Datum: <u>NGV0 1909</u> .(m)Datum: <u>NGV0 1909</u>
G9. BFE or (in Zone AO) depth of flooding at	the building site is:	<u> 904 . 4</u> ft	.(m)Datum: <u>NGW) 19∂</u> 9
LOCAL OFFICIAL'S NAME L'SA WAG	O TITLE STOWN	water M	unager
COMMUNITY NAME / Flagstaft	TELEPHONE 7	79- 7085	and the second s
SIGNATURE SIGNATURE	DATE //	108 102	
COMMENTS		100103	
	/		
	•	1: 1	Check here if attachments